

City of Long Beach

P.O. Box 310
Long Beach, WA 98631

Application for Subdivision

Application Number _____

Applicants Name _____ Phone _____

Mailing Address _____

City _____ State _____ Zip _____

- This Application for subdivision applies to the property described below:

Property Address _____

Located On _____ Side of _____
(North, South, East or West) (Street, Road or Boulevard)

_____ Feet From _____

Current City Zoning _____

Legal Description: Lot _____ Block _____ Addition _____

Lot Size _____ X _____ Total Square Feet _____

Describe the proposed subdivision request: _____

Support facts with the following attached document: Site Plan (To Include: boundaries, dimensions, cross sections, vicinity map, lot sizes and drawing to scale) Topography maps may be requested on larger proposals.

The foregoing information is true and complete. I hereby acknowledge the requirements set forth in the Zoning Ordinance of the City of Long Beach

Date _____ Signature _____